ATTENTION

122200

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden
hours per form

SE	C USE ON	LY
Prefix		Serial
DA	TE RECEIV	ED ED

	<u> </u>	☐ Rule 505	X	Rule 506	☐ Section 4(6)	⊠ ULOE
Type of Filing: ⊠New Filing	☐ Amendment					
	A. BASIC	IDENTIFICATIO	ON DAT	ГА	x	
1. Enter the information requested a	bout the issuer					
Name of Issuer (check if this i	s an amendment and name h	as changed, and indi	icate ch	ange.)		00)
Baynote, Inc.		-	*			
Address of Executive Offices	(Number and Stre	et, City, State, Zip C	Code)	Telephor	e Number (Including).	Area Code)
12101 Stonebrook Drive, Los Alto	s Hills, CA 94022			(408)39	0-8001	
Address of Principal Business Operat	ions (Number and Stre	et, City, State, Zip C	Code)	Telephor	e Number (Including)	Area Code)
Rule 505 Rule 506 Section 4(6) ULOE						
Brief Description of Business						PROCESSE
Software		•				- AFOSED
A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer lame of Issuer (check if this is an amendment and name has changed, and indicate change.) Image: A. Basic IDENTIFICATION DATA						
Type of Business Organization						2005
	 limited partnership, alrea 	eady formed			other (please specify):	THOMSON
☐ business trust	☐ limited partnership, to	be formed				FINANCIA
	Rule Sot Rule 505 Rule 506 Section 4(6) ULOE					
Actual or Estimated Date of Incorpora	tion or Organization:	1 1	0	4	■ Actual ■ Estimat	ed
Jurisdiction of Incorporation or Organi	ization: (Enter two-letter U.	S. Postal Service abl	breviati	on for Sta	te:	
CN fo	r Canada; FN for other foreig	gn jurisdiction)			DE	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: <u>Five (5) copies</u> of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

		BASIC IDENTIFICA	IIUN DATA		
2. Enter the information request	J	-			
• Each promoter of the issuer, i		•	•		
 Each beneficial owner having issuer; 	g the power to vote or o	dispose, or direct the vote of	r disposition of, 10% or mo	ore of a class of e	quity securities of the
Each executive officer and di	rector of corporate issu	uers and of corporate genera	al and managing partners o	f partnership issu	ers; and
Each general and managing p	partner of partnership is	ssuers.			
Check Box(es) that Apply:	☐ Promoter	⊠Beneficial Owner	☐Executive Officer	□Director	☐ General and/or
Full Name (Last name first, if inc	dividual)				Managing Partner
Bradshaw, Robert					
Business or Residence Address	(Number and Street, C	ity, State, Zip Code)			
276 Huckleberry Dr., San Jose	, CA 95123				
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	dividual)			- · · · <u>· · · · · · · · · · · · · · · ·</u>	
Hummer, John – c/o Hummer	Winblad Venture Par	rtners V, L.P.			
Business or Residence Address	(Number and Street, C	ity, State, Zip Code)			
2 South Park, San Francisco, C	CA 94107				
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner		☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	dividual)				
Jia, Jack					
Business or Residence Address	(Number and Street, C	ity, State, Zip Code)			
12101 Stonebrook Drive, Los A	Altos Hills, CA 94022				
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	dividual)				
JK&B Capital IV, L.P.					
Business or Residence Address	(Number and Street, C	ity, State, Zip Code)			
Two Prudential Plaza, 180 Nor	th Stetson Ave., Suite	4500, Chicago, IL 60601			
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	dividual)				
Tasha Seitz, c/o JK&B Capital	IV, L.P.				
Business or Residence Address	(Number and Street, C	ity, State, Zip Code)			
Two Prudential Plaza, 180 Nor	th Stetson Ave., Suite	4500, Chicago, IL 60601			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	dividual)				
Business or Residence Address	(Number and Street, C	ity, State, Zip Code)			
		<u>.</u>	·		
· ·	(Use blank sheet, or	r copy and use additional co	pies of this sheet, as neces	sary.)	

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DOCSSV1:299288.1

B. INFORMATION ABOUT OFFERING		
	Ye	s No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?		\boxtimes
Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?	\$_	6,002
2. What is the manning to contain with our descriptor from any many many many many many many many	Ye	
3. Does the offering permit joint ownership of a single unit?		\boxtimes
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any		
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state		
or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such		
a broker or dealer, you may set forth the information for that broker or dealer only.		
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
	_	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)		☐ All States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA]	[HI]	[ID]
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN]	[MS]	[мо ј
	[OR] [WY]	[PA] [PR]
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)		☐ All States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA]	[HI]	[D]
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN]	[MS]	[мо ј
	[OR] [WY]	[PA] [PR]
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)		☐ All States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA]	[HI]	[ID]
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK]	[MS] [OR]	[MO] [PA]
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			•		
	Type of Security	О	Aggregate ffering Price			nount Already Sold
	Debt	\$_			\$_	
	Equity	\$_	4,500,018		\$_	4,500,018
	☐ Common ☐ Preferred (convertible to common stock)					
	Convertible Securities (including warrants)	\$_	· · · · · · · · · · · · · · · · · · ·		\$_	
	Partnership Interests	\$_			\$_	
	Other (Specify)	\$_			\$_	
	Total	\$_	4,500,018		\$_	4,500,018
	Answer also in Appendix, Column 3, if filing under ULOE.					
	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
			Number Investors			Aggregate ollar Amount of Purchases
	Accredited Investors		8		\$_	4,500,018
	Non-accredited Investors			_	\$_	
	Total (for filings under Rule 504 only)	\$_	0		\$_	0
	Answer also in Appendix, Column 4, if filing under ULOE.					
	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.					
	Type of Offering		Type of Security		D	ollar Amount Sold
	Rule 505			_	\$_	5014
	Regulation A			_	\$_	
	Rule 504				\$_	
	Total				\$_	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees				\$_	
	Printing and Engraving Costs				\$_	
	Legal Fees			X	\$ _	25,000
	Accounting Fees				\$_	
	Engineering Fees				\$_	
	Sales and Commissions (specify finders' fees separately)				\$_	
	Other Expenses (identify)				\$_	
	m1			_	er -	4 475 019

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE OF PROCEE	DS
	b. Enter the difference between the aggregate offering price in response to Part C-Question 1 and total expenses furnished in response to Part C-Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$ 4,475,01
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.		
	above.	Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	\$. 🗆 \$
	Purchase of real estate	\$. 🗆 \$
	Purchase, rental or leasing and installation of machinery and equipment	\$. 🗆 \$
	Construction or leasing of plant buildings and facilities	\$	\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□ \$	□ \$
	Repayment of indebtedness	S	. 🗆 \$
	Working capital	\$	× \$ 4,475,018
	Other (specify):	\$. 🗆 \$
		" \$. 🗆 \$
	Column Totals	<u> </u>	★ \$ 4,475,018
	Total Payments Listed (column totals added)	⊠ \$_	4,475,018
	D. FEDERAL SIGNATURE	w	
follo	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If wing signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Excess staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph	this notice is filed u	pon written request
	r (Print or Type) NOTE, INC.	Ma Dai	re rch 29, 2005
	e of Signer (Print or Type) d C. Lee Title of Signer (Print or Type) Secretary		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

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			: 3 1 3 3 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	AP	PENDIX			_	5
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	Nο		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
ΑZ				:					
AR									
CA		xx	Series A Preferred, \$0.952	6	\$2,400,011				xx
СО									
СТ									
DE									
DC									
FL									
GA									
HI									
ID									
IL		XX	Series A Preferred, \$0.952	2	\$2,100,007				xx
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN									
MS									
МО							!		

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			Experience of the control of the con	API	PENDIX	4			
1	Intend to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No.		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT									
NE									
NV									,
NH									
NJ									
NM									
NY									
NC									
ND									
ОН									
OK									
OR									
PA									
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA									
WA									
wv								,	
WI									
WY									